Engage Your Practice and Kick Start Your ICD-10 Transition Efforts

Presented by Ken Bradley
Agenda

- The Latest News
- Assessment and Engagement
- What Needs Done
- IT Vendor Questions
- Training
The Latest

❖ We Have Another Cost Estimate:

❖ The Professional Association of Healthcare Office Management (PAHCOM) issued a report this month reporting that costs for a small office will be on average $8,167.

- Based on actual costs reported by 276 practices
- $4,372 for 1 physician to $11,028 for 6 physicians
- CMS transition resources are helping
- Vendors are providing ICD-10 updates at no cost

❖ Previous cost estimates:

- AMA: $22,560 - $105,506
- AHIMA: $1,900 - $5,900
The Latest

Government Accountability Office (GAO) issued a report saying:

“Efforts by CMS to prepare providers, clearinghouses and health plans by Oct. 1, 2015 are on track.”

Senators Orrin Hatch (R) and Ron Wyden (D) said: “[They have]… confidence that CMS is adequately preparing..” and “… [has] taken unprecedented actions to help providers prepare for this change.”
The Latest

House Committee on Energy and Commerce held a hearing on “Examining the ICD-10 Implementation”

- Several house members stated their support for the Oct. 1, 2015 implementation date – including Chairman Pitts.
- Nearly all who testified said that the industry is or will be ready.
- However, while Members agreed there was need to move forward, some voiced concern whether another delay might be necessary or further studies are needed.
The Signs Are Growing

While it is still possible we could have another delay, it looks much more likely that the transition will happen on **October 1, 2015**.
Necessary Steps to Take

- Identify an ICD-10 Champion
- Create an ICD-10 Transition team
- Obtain physician/leadership commitment
- Identify costs and create a transition budget
- Do a diagnosis inventory
- Assess and update clinical documentation
- Create an education plan
- Create a transition plan
- Review revenue cycle for effectiveness and efficiency
More than likely, your practice has:

- Not started
- Started but you’re not sure what has been done, unsure whether it works
- Made transition changes and perhaps are close to being finished
Reasons For Not Starting/Delaying

- If you haven’t started, find the reasons for not starting or delaying.
  - Cost
  - Lack of leadership
  - Confusion because of delays
  - Understanding the value
  - Resistance to change
  - Difficulty in learning a new language

- Regardless of the reason, address them to get things moving.
  - Time is not your friend.
Who Needs to Get Moving

❖ Physicians and Clinicians

❖ Clinical documentation is essential for ICD-10 success.

❖ Coders

❖ Knowledge of ICD-10, medical policy, quality metric changes, enhanced anatomy, physiology, etc are critical
Who Needs to Get Moving

◆ Administrators

◆ Overall ICD-10 transition planning
◆ ICD-10 Leadership or Identification of a Project Leader
◆ Creation of an ICD-10 team
◆ Must review their revenue cycle to make sure it is both efficient and effective prior to the assault ICD-10 will bring:
  • Automate as much as possible
  • Ensure claims continue to be paid
    – Navicure’s On-Line Claim Review and Correction allows real-time correction and resubmission
    – Navicure Code Source is an electronic ICD-10 and ICD-9 code book permitting fast code lookup, review and expert advice
    – Navicure’s ICD-10 and ICD-9 LCD/NCD edits review claims to ensure medical necessity
    – Navicure’s Denial Identification and Tracking
      » Expect an increase in denials post-implementation
Steps Administrators To Take Now

- Identify leadership and make a plan
- Get your practice staff and physicians engaged
- Get your IT systems ready
- Create an education plan
Organizational Challenge

- The transition to ICD-10 is an organizational challenge and requires participation from everyone.

- Administrators and project leaders must get practice staff and physicians engaged.
Clinical documentation must be updated to accommodate ICD-10’s specificity requirements.

Without it, billing will be difficult, time consuming, and disruptive.
Ideas for improving physician involvement:

- Physicians relate to physicians, so find a physician advocate
- Target physician efforts with tailored and targeted diagnosis education
- Find help with medical associations, specialty societies
- Track use of non-specific codes, for example, health plans may report these using codes like:
  - 125 – submission / billing error
  - M81 – patient diagnosis truncated, missing or incorrect. You are required to code to the highest specificity.
Ideas for improving physician involvement:

- Remind physicians that documentation can best show the connection between performance and the patient’s condition.
- Illustrate the delay and cost associated with coding delays due to follow-up coding queries.
- As we enter the age of increased transparency, more documentation specificity can demonstrate proficiency and patterns of care along with how patients are healing with or without complications.
- Conduct regular chart audits and review findings with physicians.
Ideas for improving physician involvement:

Reminder: ICD-10 specificity requires much greater details, like:

- Laterality
- Stage of healing, e.g., routine, delayed
- Trimester of pregnancy
- Episode of care, e.g., initial, subsequent encounter
- Injuries must be reported with details about depth, size and cause
- Combination codes must reflect the association between conditions
- New clinical concepts like underdosing.
Ideas for improving staff involvement:

- Communicate often, wisely and succinctly
- After obtaining leadership and physician commitment, communicate the organization commitment and priority that ICD-10 has to everyone
- Make sure that each staff member is aware of his/her role, what they are responsible for and when
- Push status and updates as appropriate to everyone
- Collaborate and involve those most affected when necessary
- Make sure that the risks for not being ready are understood by everyone.
- Emphasize that ICD-10 is not just another ICD-9 update: it’s a completely new coding language to learn.
- Be an ICD-10 advocate for your practice

Indira Gandhi:
“Whenever you take a step forward you are bound to disturb something.”
Expected benefits – hypothetically speaking, of course

- ICD-9 is 30 years old and has not and cannot be used to describe many newer concepts nor does it have room to expand.
- More specificity with codes means less time reviewing documentation and more automation.
- Improved awareness of medical best practices.
- Help facilitate care consistency and coordination.
- More details help defend against possible litigation.
- More details help promote evidence-based practices.
- Reimbursement is expected to more accurate and appropriate.
- Less need for attachments or clinical notes.
- Improves communication among providers
- Improves ability to track disease
- Assists with research and monitoring of new technologies and treatments
Get your IT systems ready

❖ If you have not installed necessary changes for ICD-10, find out:
  ❖ When will the changes will be available
  ❖ Will we receive one update or multiple?
  ❖ Will there be any downtime as a result of the update?
  ❖ Is there training?
  ❖ What types of testing has been done?
  ❖ Will the update delete or overwrite some or all of existing customization?
  ❖ Will the problem list require customization?
  ❖ Who is responsible for updating template(s).
  ❖ How long will the system support ICD-9?
  ❖ Can we continue to send ICD-9 to payers not ready for ICD-10?

Please note: No testing is required for eCW sites.
Navicure and eCW have successfully tested for ICD-10 on their client’s behalf.
Get your IT systems ready

- Install necessary IT and software changes as soon as possible.
  - Get this out of the way!
  - Be an expert on how the software has changed in advance.
  - This is required for you to be able to test
  - This is required for you to participate in end-to-end testing
  - Caution: smaller practices should ask about product “stability” before proceeding.

Please note: No testing is required for eCW sites. Navicure and eCW have successfully tested for ICD-10 on their client’s behalf.
Create an education plan

Education is not optional and is critical for success.

“People” updates may be the most challenging.

Knowledge of and application of ICD-10 coding guidelines are the critical first step.

Getting proficient with ICD-10 will take knowledge, time and practice.
Create an education plan

✿ **Who?**
   - List affected staff members
   - Identify staff competence and skill gaps

✿ **How?**
   - Determine how to tailor training to individuals or user groups
   - Choose the best approach training methods

✿ **Timetable?**
   - Decide on optimal timing to receive training and certification
   - As we get closer to the date, there may be a rush.

✿ **Evaluate!**
   - Assess ICD-10 proficiency after training and provide additional training to address identified areas of weakness
Create an education plan

Different practice members may need different types of training:

Coders:

- Anatomy
- Physiology
- Pathophysiology
- Pharmacology
- Medical Terminology
- General ICD-10
- Specialty
- Proficiency / certification training / testing
Create an education plan

Different practice members may need different types of training:

- **Physicians:**
  - Documentation
  - Focus on most used codes first

- **Managers:**
  - Documentation challenges
  - Budgeting
  - Mapping / crosswalks
  - Templates, tools resources
  - General ICD-10
Create an education plan

Consider a phased approach:

- Biomedical science review / refreshers
- Differences between I-9 and I-10
- Code structure and organization of I-10
- Coding conventions / guidelines
- ICD-10 definitions
- 6 - 9 months prior - in depth education
- Practice with real record
- Peer networking
Free Educational Resources

WHO ICD-10 Introduction Self-Help Training Tool

http://apps.who.int/classifications/apps/icd/icd10
training/
## WHO ICD-10 Overview

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<td>Chapter X</td>
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- **Certification**
- **Confidentiality and ethics**
- **Quality**

- **Rules and guidelines for morbidity coding**
- **Rules and guidelines for mortality coding**
- **Statistical presentation**

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[http://apps.who.int/classifications/apps/icd/icd10training/ICD-10%20training/Start/index.html](http://apps.who.int/classifications/apps/icd/icd10training/ICD-10%20training/Start/index.html)
ICD-10 Interactive Self Learning Tool

The WHO Electronic ICD-10-training tool is designed for self-learning, and classroom use. The modular structure of this ICD-10 training permits user groups specific tailoring of courses on individual paths, if desired. Detailed information is given in the introduction of the tool, and in the user guide.

You can access the user guide from here and print or save it. The manual can also be accessed at any time during the training.

Start the training
There are two versions of the training tool

- Full ICD-10 training that contains all modules
- Cause of death certificate version, for persons that fill in causes of death on a death certificate.

Self-learners may have questions while working on one or the other section of the training. A website allows interaction with a group of specialists.
Basic Understanding Resources

- CMS ICD-10-CM Official Guidelines for Coding and Reporting 2013
More time to review where diagnosis values are used
- Identify places where improvements can be made prior to ICD-10.

Let's **staff become experts** with process changes and new IT solutions.

Improvements today help your costs and improve revenue today.
You have time to install improvements to your revenue cycle before the expected increases in rejections and denials to keep the cash flowing.

- Navicure’s Real-Time Claim Correction and Resubmission.
- Navicure’s ICD-9 and ICD-10 versions of Medical Necessity Edits.
- Navicure’s Code Source.
- Navicure’s Automated Denial Identification and Tracking.
LIKELY NO MORE DELAYS. Déjà vu
Navicure Is Ready Now, But Will …

- Continue monitoring CMS and payer announcements.

- Continue practice management vendor, client and payer outreach.

- Continue testing with as many clients, payers and vendors as they are capable.
Use strategies that were successful in previous transitions like 5010.

- Monitor payer rejection rates and reasons
- Monitor payer denial rates and reasons
- Take proactive action with clients, vendors and payers to find and implement fast solutions
- 3-Ring customer service
Tools to include in your preparation

(Important- new tools NOW, help NOW)
The ICD-10 implementation steps
ICD-10 Hub (www.icd10hub.com)

Sink or Swim?
Get Started Preparing for ICD-10:
8 Steps for Transition Success

VIEW DETAILS

icd10 ANALYZER™ by navicure

Find out how ICD-10 will impact your claims reimbursements.

GO>

ICD-10 HUB BLOG

The latest news and tips about ICD-10 as presented by industry experts.

GO>

Sink or Swim?

Learn the 8 steps to ensure ICD-10 transition success.

GO>

RECENT NEWS

Get the scoop on the latest news in the ICD-10 world.

GO>
TOP 20: ICD9 ➔ ICD10 IMPACT for 28281377Alter [with 29 codes]

- **ICD9: 780.79** Other malaise and fatigue
  - Frequency: 12%
  - Impact Rating: L
  - Related ICD-10 Codes: 4
  - View Details

- **ICD9: 780.53** Hypersomnia with sleep-related
  - Frequency: 20%
  - Impact Rating: H
  - Related ICD-10 Code: 1
  - View Details

- **ICD9: 786.09** Other respiratory abnormality
  - Frequency: 9%
  - Impact Rating: L
  - Related ICD-10 Codes: 5
  - View Details

- **ICD9: 806.4** Closed fracture of lumbar spine
  - Frequency: 1%
  - Impact Rating: L
  - Related ICD-10 Codes: 24
  - View Details

- **ICD9: 786.05** Shortness of breath
  - Frequency: 11%
  - Impact Rating: L
  - Related ICD-10 Code: 1
  - View Details

- **ICD9: 327.23** Obstructive sleep apnea
  - Frequency: 10%
  - Impact Rating: L
  - Related ICD-10 Code: 1
  - View Details

Impact Rating is based on how frequently the code appears in the processed file and number of related ICD-10 codes.
ICD9: 806.4 Closed fracture of lumbar spine with spinal cord injury

6 ICD-10 Code Clinical Scenarios with 18 possible code combinations.

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<th>Scenario 1</th>
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<tr>
<td>Choose 1 of the following:</td>
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</tr>
<tr>
<td>S34.129A</td>
<td>Incomplete lesion of unspecified level of lumbar spinal cord, initial encounter</td>
</tr>
<tr>
<td>S34.109A</td>
<td>Unspecified injury to unspecified level of lumbar spinal cord, initial encounter</td>
</tr>
<tr>
<td>S34.119A</td>
<td>Complete lesion of unspecified level of lumbar spinal cord, initial encounter</td>
</tr>
<tr>
<td>AND</td>
<td></td>
</tr>
<tr>
<td>S32.009A</td>
<td>Unspecified fracture of unspecified lumbar vertebra, initial encounter for closed fracture</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Scenario 2</th>
<th></th>
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<tbody>
<tr>
<td>Choose 1 of the following:</td>
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<tr>
<td>S34.111A</td>
<td>Complete lesion of L1 level of lumbar spinal cord, initial encounter</td>
</tr>
</tbody>
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## ICD-10 Impact Summary - Sorted by Impact

<table>
<thead>
<tr>
<th>Score</th>
<th>ICD-9</th>
<th>Diagnosis</th>
<th>Frequency of Use</th>
<th>Related ICD-10 Codes</th>
<th>Top Providers</th>
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</thead>
<tbody>
<tr>
<td>MEDIUM</td>
<td>780.79</td>
<td>Other malaise and fatigue</td>
<td>37 by 1 Provider</td>
<td>4</td>
<td>RICHARD BROOKS</td>
</tr>
<tr>
<td>MEDIUM</td>
<td>786.09</td>
<td>Other respiratory abnormalities</td>
<td>28 by 1 Provider</td>
<td>5</td>
<td>RICHARD BROOKS</td>
</tr>
<tr>
<td>MEDIUM</td>
<td>780.53</td>
<td>Hypersomnia with sleep ap</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MEDIUM</td>
<td>806.4</td>
<td>Closed fracture of lumbar s injury</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LOW</td>
<td>786.05</td>
<td>Shortness of breath</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LOW</td>
<td>327.23</td>
<td>Obstructive sleep apnea (a)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LOW</td>
<td>278.01</td>
<td>Morbid obesity</td>
<td></td>
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</tbody>
</table>

### ICD9: 813.47 Torus fracture of radius and ulna

- Related ICD10 Codes
  - S52.621A Torus fracture of lower end of right ulna, initial encounter for closed fracture
  - S52.011A Torus fracture of upper end of right ulna, initial encounter for closed fracture
  - S52.622A Torus fracture of lower end of left ulna, initial encounter for closed fracture
  - S52.012A Torus fracture of upper end of left ulna, initial encounter for closed fracture
  - S52.511A Torus fracture of lower end of right radius, initial encounter for closed fracture
  - S52.522A Torus fracture of lower end of left radius, initial encounter for closed fracture
  - S52.112A Torus fracture of upper end of left radius, initial encounter for closed fracture

Used: 1 time
Top Provider: RICHARD BROOKS
Navicure Code Source

- Comprehensive ICD-9 and ICD-10 information at your fingertips: code definitions, cross-walks, expert advice.

- Install now to be an expert before ICD-10 arrives.

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### Knowledgebase
- Coding Guidelines
  - CCI Policy Manual (6)
  - CPT/HCPCS Guidelines (6)
  - E&M Guidelines (2)
  - ICD-9-CM Guidelines (3)
  - ICD-10 Guidelines (15)
  - CMS FAQs (28)

### MC Manuals

### Policies and Bulletins
- LCD - Carrier/MAC (1000+)
- NCD - National Coverage Det. (300)
- DMERC (208)

### ICD-10 Policies
- LCD - Carrier/MAC (0)
- NCD - National Coverage Det. (24)

### Federal Guidelines
- Federal Register (735)
- Transmittals (290)
According to CMS, in the early stages of ICD-10, denial rates will increase by 100 to 200 percent.*

Summary

• ICD-10 didn’t go away and all of us must prepare!
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ICD-10 and HIPAA 5010 Implementation

The Medical Group Management Association (MGMA) believes the transition to HIPAA 5010 and ICD-10 will be extremely costly and challenging for medical groups.

As the ICD-10 deadline approaches, MGMA is working on behalf of our members to make the transition to ICD-10 coding more cost effective and less stressful.

Take a look at the comprehensive list of ICD-10 resources to help your organization through the stages of transition.

MGMA Executive Partner ICD-10 and 5010 Resources

MGMA works alongside industry partners to ensure our members have useful and practical resources to help make ICD-10 implementation easier.

- **ICD-10 Hub**: A free educational website devoted to making physician practices’ transitions to ICD-10 easier. Courtesy of Navicure.
- **ICD-10 Analyzer**: A complimentary online tool that enables medical billers to identify the ICD-9 codes that will most impact a user’s payer reimbursement and suggest corresponding ICD-10 codes. Courtesy of Navicure.
ICD-10 Implementation Guide for Physician Practices

15 essential steps for ICD-10— with benchmarks and timelines for any practice size or specialty
Item # 8486
ISBN: 9781568293943

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